Home Health ICD-9/ICD-10 Alert

Coding How-To: Clear A Path Through Burn Coding Confusion

Follow these 5 steps to smoke out burn coding errors.

Pop quiz: What's the single biggest mistake coders make when dealing with burns?

Answer: They stop with a single code. Remember, patients with burns often have them in more than one location. And even in a single location, burns can be more than one degree of severity.

If you become confused when reporting diagnoses for burns other than sunburns (692.71, 692.76-692.77) or friction burns (910.x-919.x), these expert tips can put you on the right path:

Step 1: Pinpoint the burn's location. Ask yourself, "What general anatomic location did the patient burn?" says Waukesa, WI-based coding consultant **Katie Cianciolo.** Then use the 941-947 codes to identify the location.

For example, if the patient has a burn on his face, you would assign the appropriate code from the 941 series, which also describes head and neck burns. For a burn confined to the eye and adnexa, you should assign a code from the 940 series. Use the 942 series for burns to the trunk. Codes in the 943, 944 and 945 series describe burns to the patient's arms, hands and legs, respectively.

Don't forget to assign multiple codes for burns in separate anatomic locations.

Example: If a patient presents with burns on his left arm and right leg, report both 943.xx (for the arm burns) and 945.xx (for the leg burns), assigning the fourth and fifth digits as appropriate.

Step 2: Use severity to identify degree. To determine the fourth digit, you need to know the burn severity. Typically, you should use the following fourth-digit codes:

1. 0 - unspecified degree

2. 1 - erythema (first-degree)

3. 2 - blisters, epidermal loss (second-degree)

4. 3 - full-thickness skin loss (third-degree).

When reporting multiple burns of differing degrees for the same area, code only the highest-level burn, Cianciolo says. For example, if a patient has both first- and second-degree burns on the face, report only the more severe (second-degree) burns, using the location code 941 and a fourth digit of 2. If the same patient also had second- and third-degree burns on the left arm, you would report 943.3x in addition to 941.2x.

Step 3: Mark the exact burn spot. The burn's location determines the code's fifth digit. Unlike the categories for the fourth digit - which are the same regardless of body area - the fifth-digit categories are specific to the affected area. For example, when you apply a fifth digit of 1 to 941.xx, you are indicating that the burn is on the "ear [any part]," whereas when you apply a fifth digit of 1 to 942.xx, you are describing a burn on the breast.

Watch for: Remember, higher-degree burns take precedence over lesser-degree burns in the same general anatomic area.

Example: For a second-degree burn on the upper back and a first-degree burn on the lower back, report only 942.24 because both burns are on the trunk. But code an additional first-degree burn on the forearm separately (943.11), because the arm is part of a different body area.

Step 4: Survey the area affected by the burn. Next, assign a diagnosis that reflects the burn's extent. With 940-947, ICD-9 guidelines instruct you to use a secondary diagnosis from the 948 series, even when the patient has a single or first-degree burn, says **Jaime Darling, CPC**, certified coder for **Graybill Medical Group** in Escondido, Calif. To assign 948's fourth and fifth digits, you need to know what percentage of the patient's body is burned and what percentage of the patient's body contains third-degree burns.

Example: If a patient presents with a first-degree burn on his index finger, assign 948.00 for the secondary diagnosis. Because the patient burned less than 10 percent of his body, assign a fourth digit of "0" (Burn [any degree] involving less than 10 percent of body surface), Darling says. Because the burn is only a first-degree burn, the percentage of third degree is 0 and the corresponding fifth digit is "0" (... less than 10 percent or unspecified).

Step 5: Note what caused the burn. If the burn is accidental, report an E code. ICD-9 classifies accidents caused by fire and flames to E890-E899 (Accidents caused by fire and flames). Look in E924.x (Accident caused by hot substance or object, caustic or corrosive material, and steam) for codes describing accidental burns from hot objects.

Example: If the patient accidentally burned herself with boiling water, use code E924.0 (... hot liquids and vapors, including steam). E codes may help determine if a third-party payer is liable for treatment costs.